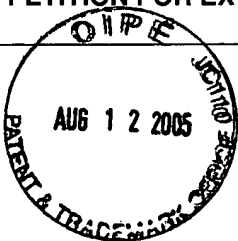


**PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)**

 Docket Number (Optional)  
 407T-897810US


In re Application of Joseph R. Pisegna, et al.

Application Number: 09/671,764

Filed: September 27, 2001

 For USE OF PENTAGASTRIN TO INHIBIT GASTRIC ACID  
 SECRETION OR AS A DIURETIC

Group Art Unit 1653

Examiner Chih Min Kam

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above-identified application.

The requested extension and appropriate non-small-entity fee are as follows  
 (check time period desired):

- |                                     |  |        |
|-------------------------------------|--|--------|
| <input type="checkbox"/>            | One month (37 CFR 1.17(a)(1))  | \$120  |
| <input type="checkbox"/>            | Two months (37 CFR 1.17(a)(2))   | \$450  |
| <input checked="" type="checkbox"/> | Three months (37 CFR 1.17(a)(3))   | \$1020 |
| <input type="checkbox"/>            | Four months (37 CFR 1.17(a)(4))  | \$1590 |
| <input type="checkbox"/>            | Five months (37 CFR 1.17(a)(5))  | \$2160 |
| <input checked="" type="checkbox"/> | Applicant is a small entity under 37 CFR 1.9 and 1.27, therefore the fee amount shown above is reduced by one-half, and the resulting fee is: \$ <u>510.00</u> . |        |

A small entity statement under 37 CFR 1.27:

- ☐ is enclosed.
- ☐ has already been filed in this application.

- ☐ A check in the amount of the fee is enclosed.
- ☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.
- ☒ The Commissioner is hereby authorized to charge any fees that may be required, or credit any overpayment, to Deposit Account Number 50-0893. *I have enclosed a duplicate copy of this sheet.*

I am the ☐ assignee of record of the entire interest.

☐ applicant.

☒ attorney or agent of record.

☐ attorney or agent under 37 CFR 1.34(a)

Registration number if acting under 37 CFR 1.34(a). \_\_\_\_\_

August 8, 2005

Date

Signature

Tom Hunter, 38,498

Typed or printed name and Reg. No.

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, DC 20231 on the date below:

Typed or Printed Name	Chianti Appling		
Signature			Date
			8/8/05

08/15/2005 DEMMANU1 00000034 500893 09671764

02 FC:2253

510.00 DA